

Mail or Fax To: 14th Floor Capitol Building 600 E Boulevard Ave Dept 012 Bismarck ND 58505-0310 (701) 328-2740 Fax: (701) 328-1615

Use this form to report complaints, problems, or concerns you may have about a vendor, its products and services, or any program or individual in Central Services Division.

Central Services Division.					
Date of Complaint:	Purchase Order or Requ	Purchase Order or Requisition Number:		Purchase Order or Requisition Date:	
Vendor's Name or CSD Program/Individual					
Vendor's Address:	City:		State:	Zip Code:	
Explain the complaint in detail. Be specific. (Use the back of the form or attach additional documentation if necessary)					
Name of Agency Head:					
Contact Person's Title:		Contact Person's Signature:			
Agency Name:		Department Number:		Telephone Number:	
Agency Address:	City:		State:	Zip Code:	
FOR USE BY CENTRAL SERVICES DIVISION - STATE PROCUREMENT OFFICE ONLY					
Action Taken:					
Agency notified as to disposition.					
By:				Date:	